

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SP		8-22-01
O.I.P.E. CLASSIFIER	Dr	52	7/3
FORMALITY REVIEW	L.I.	1106	7/2/01
RESPONSE FORMALITY REVIEW	JS	5C906	06/28/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	1-2-10-03
2	2-9-12-03
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Claim	Date
Final	
Original	
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52	2-9-12-03
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

(1 FEET INSIDE)

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